PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Application or Docket Number (8) 549479				
CLAIMS AS FILED - PART I								SMALL E	ENT			ОТНЕ	R THAN
U	S. NATIONA	L STAGE FEES		(Column 1)		(Column 2)		7		OR		SMALL ENTITY	
H	ASIC FEE			SMALL ENT = \$ 150			4	RATE		FEE		RATE	FE
┝		 		Satisfies PCT Article 33(1)-		RGE ENT. = \$ 300	4	BASIC FEE		150	OR	BASIC FEE	
EXAMINATION FEE			(4) = \$	50/\$100	All	other situations = \$ 100 / \$ 200		EXAM. FEE		100		EXAM. FEE	
SEARCH FEE			ALL other	U.S. is ISA = \$50 / \$ 100 ALL other countries = \$ 200 / \$ 400		other situations = \$ 250 / \$ 500		SEARCH FEI	E	20X	3	SEARCH FEE	
FE	E FOR EXTRA	SPEC. PGS.	m	minus 100 =		/ 50 =	7	X \$ 125 =	-		9	X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			8.	8 minus 20 = *			1	X \$ 25 =	1		OR	X \$ 50 =	+
INC	EPENDENT C	CLAIMS	12	minus 3 =	*		X \$ 100 =	:		OR	X \$ 200 =	1	
MU	LTIPLE DEPE	NDENT CLAIM PE	RESENT	N			1	+ \$ 180 =	+		OR	+ \$ 360 =	
* 11	the difference	ce in column 1 is	less than ze	ro, enter "0"	in c	olumn 2		TOTAL	1	150	OR	TOTAL	
	I	(Column 1)	AMENDE	D - PART (Colum HIGHE	n 2)	(Column 3)	ī	SMALL			OR	OTHER SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONA FEE
	Total	*	Minus	**		=		X \$ 25 =	Π		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =			OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI				AIM			+ \$ 180 =			OR	+ \$ 360 =	
							ı	TOTAL ADDIT.	L		ÖR L	TOTAL ADDIT.	
		(Column 1)		(Column	2)	(Column 3)		-					
2 2		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	TI	DDI- ONAL FEE		RATE	ADDI- TIONAL FEE
	Fotal	*	Minus	**		=	ı	X \$ 25 =			OR -	X \$ 50 =	
מוודיו ארבו אודיו	ndependent	*	Minus	***		=	f	X \$ 100 =	_		-	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAI				i	$\neg \neg \dashv$	ŀ	+ \$ 180 =			-	+ \$ 360 =	
							L	TOTAL ADDIT.			<u> </u>	OTAL ADDIT.	
II H	the "Highest Nur	mn 1 is less than the nber Previously Paid nber Previously Paid F ber Previously Paid F	For" IN THIS SP	ACE is less tha	in '20',	, enter "20".	the	appropriate box	in co	lumn 1.			

FORM 9TO-875 (Rev. 02/2005)

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